SOUTH CAROLINA PUBLIC SERVICE COMMISSION

and

SOUTH CAROLINA OFFICE OF REGULATORY STAFF

GROSS RECEIPTS FOR THE TWELVE (12) MONTHS ENDING JUNE 30, 2006

(Please correct preprinted information as required)

Company Name (as shown on Certificate)		FEIN	
List d/b/a and/or f/k/a aliases			
Address	City	State	Zip Code
Regulatory Contact	Area Code & Phone Number	E-N	fail
INTRA	STATE GROSS REC	EIPTS	
Intrastate Gross Receipts in South Card	lina from:		A
Water Revenues		\$	
Sewer Revenues		<u></u>	
Electricity Revenues			
Gas Revenues			
Railroad Revenues			
Telecommunications Revenues:			***************************************
ILEC			
CLEC			
IXC			
Total Intrastate Gross Receipts in	n South Carolina	\$	
Decrease Cinneture	 Date	AAAAAAAAAAAAAAAAAA	,
Preparer's Signature	Date		
State of	County of		Affidavit
Personally appeared before me			
he/she is the	of		(Company) and
that the foregoing statement, for the tw	elve (12) months ending June	30, 2006, is cor	rectly taken from the
books and records of said Company, an	d is true to the best of his/her	knowledge and b	elief.
Sworn to and subscribed before me this	da	ay of	, 20
Notary Public			Place
**tastas avainas			Seal
and committee of the co			Here
Return completed form via U.S. Mail to:			
	-	Timely completion	and euhmission of this form

South Carolina Office of Regulatory Staff

Attention: Robert Sutherland

P.O. Box 11263 Columbia, SC 29211 Timely completion and submission of this form satisfies the Gross Receipts reporting requirements of both the Public Service Commission and Office of Regulatory Staff.